



## Kansas Department of Health and Environment

# Long Term Care Program

# FACT SHEET II

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January 2003

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Please route this **FACT SHEET** to nursing staff and other interested parties in your facility. This publication may be copied or accessed through the internet address above.

### E mail Delivery of the FACT SHEET II

In order to save money and staff time, the bureau would like to be able to e mail the FACT SHEET II to as many assisted living, residential health care facilities as possible. If your facility has an e mail address, please e mail Patricia Maben at [pmaben@kdhe.state.ks.us](mailto:pmaben@kdhe.state.ks.us). If a majority of facilities have e mail addresses, this will allow the bureau to distribute information to facilities on an as needed basis. The FACT SHEET II will be sent by e mail, if an address is available. The FACT SHEET II will be sent by regular mail if the facility does not use e mail.

### Compliance Review: A New Survey Process

The process used to determine regulatory compliance for freestanding assisted living, residential health care, adult day care and home plus facilities will change in 2003. Industry representatives, bureau staff, and persons representing the public were active participants in development of the new process.

Surveyors will be called compliance advisors. Each compliance advisor will be assigned specific facilities. They will not only perform the compliance review at the facility, but will serve as a compliance resource to the staff. The intent is that the compliance advisors and facility staff will develop a collaborative relationship focused on ensuring quality of care and quality of life for the residents.

The compliance review process (survey) will be simplified. The focus will be on key issues related to resident care and services identified in compliance reviews. Enforcement policies and procedures will also be simplified.

The Fact Sheet is published by the Kansas Department of Health and Environment.

Bill Graves, Governor  
Clyde Graeber, Secretary

**Bureau of Health Facilities  
Curtis Office Building  
1000 SW Jackson, Suite 330  
Topeka, KS 66612-1220**

It is anticipated this new process will create a positive, interactive environment between the facility and compliance advisors. The primary focus is to achieve more consistent compliance outcomes by facilities through immediate feedback during the compliance review. The new process provides an opportunity for facility staff and the staff of this agency to work together to achieve the common goal of positive outcomes for all residents.

### Facilities Recognized for Zero Deficiency Surveys

Secretary Graeber has recognized the following facilities for achieving zero deficiency surveys. This is a significant achievement. Congratulations to the staff and owners of the following facilities.

Alterra Sterling House of Topeka	Topeka
Alterra Sterling House of Augusta	Augusta
Keen Board Care Home	Clay Center
Shawnee Heartland	Shawnee
Alterra Sterling House of Olathe	Olathe
Linwood Place	Valley Falls
Linwood Place II	Valley Falls
The Gran Villas	Eureka
Stoneybrook Assisted Living	Manhattan
Waterfront Inn Assisted Living	Wichita

### Annual and Semiannual reports

The electronic version of the FACT SHEET II contains links to semiannual and annual report forms and directions. These items are posted on the bureau website. The forms are in Adobe Acrobat format. Facility staff will be able to complete the forms using their computer. Calculations requested will be performed automatically. After completing the forms, they can be printed for submission. **Administrators/operators must review the data for accuracy before signing the form.** The form can then be faxed or mailed to the bureau. The bureau's FAX number is 785-296-1266. It is hoped that these changes will make the submission process easier.

Directions for completing the form using the computer can be accessed by clicking on the question mark icon. Facilities using the electronic form must complete the facility name and address section at the top of each form. The reports must be returned to the bureau by January 15, 2003. Sandra Dickison is the contact person for questions related to completion of the reports. Sandra can be reach at [sdickison@kdhe.state.ks.us](mailto:sdickison@kdhe.state.ks.us) or at 785-296-1245.

### Address Changes for Involuntary Discharge Notices

The Office of the Long Term Care Ombudsman will be moving. All facilities are required to provide the address of the Long Term Care Ombudsman in an involuntary discharge notice. After January 6, 2003 the address will be:

Office of the State Long-Term Care Ombudsman  
Landon State Office Building  
900 SW Jackson  
Room 1041  
Topeka, KS 66612-1220

The office for administrative hearings will also be moving on January 6. Those persons residing in a Medicaid certified nursing facility have the right to appeal an involuntary discharge. Please change the address for this office

in your involuntary discharge notice.

Kansas Department of Administration  
Office of Administrative Hearings  
1020 S. Kansas Ave.  
Topeka, KS 66612-1311

KAR 28-39-148(c) contains the requirements for an involuntary discharge in all licensed adult care homes. The federal requirements for the written discharge notice are found at 42 CFR 483.12(a)(6). It is the responsibility of the facility to ensure that each involuntary discharge notice meets the requirements found in the above regulations.

### **Administration of Physician Sample Drugs**

The article about physician samples and administration by staff employed by long term care facilities published in the July FACT SHEET II resulted in a number of letters and phone calls to the bureau. In response to concerns from physicians, families and facilities, a task force has been formed to restudy the issue. The task force has had one meeting and will be meeting again in January. Members of the task force represent the Boards of Nursing, Pharmacy, and Healing Arts. A staff person at the regional office in Kansas City with the Food and Drug Administration participated by telephone. The issues are complex and are affected by a number of federal and state statutes and regulations. The intent is to ensure that KDHE's policy is consistent with the law and meets the needs of the public. If it is found that the policy is too limited, the policy will be revised and providers will be notified.

Some residents can obtain their drugs through a program established by drug manufacturers. The medications are sent to the resident's physician. There are problems related to the labeling of the medication bottles. These issues are also being researched by the task force.

### **Regulations and Regulation Interpretation Manual Available on KDHE website.**

The regulations for adult care homes are posted on the bureau's website. The regulations are in html format and can be easily downloaded. Each regulation is a separate file, for ease in downloading. Please note that there are regulations common to adult care homes. They can be found in the file for nursing facilities. The common regulations are KAR 28-39-144 through KAR 28-39-148.

It was called to our attention that the previous regulation interpretation for tuberculin testing was printed in the Regulation Interpretation Manual issued in February of 2001. The correct regulation interpretation is now available on the website. The page numbers are 44 and 45. We apologize for this error.

### **CREDENTIALING UPDATE**

#### **Criminal Record Check Program**

Around the end of September, the Kansas Bureau of Investigation made significant changes to the automation system for the criminal history repository database. In order to implement these changes to their system, KBI had to stop processing criminal record check requests received from KDHE (as well as other entities and state agencies) for a little over one month. This naturally resulted in a significant backlog of requests. Currently, there are approximately 1,400 criminal record check requests awaiting completion. The Criminal Record Check Program staff expect to complete the processing of these requests by December 31.

## HOC Advisory Group

During the past few months, HOC, with input from the Advisory Group, has been developing a plan to shift scheduling of candidates to take the state nurse aide and home health aide certification tests from HOC to the test sites. When the shift is made, the community colleges and vocational schools will handle the scheduling for candidates who will be testing at their sites. This will allow test providers the flexibility to schedule additional tests, as necessary, as well as the regular monthly test date. HOC will continue to coordinate testing for candidates rescheduling to test and for candidates challenging the tests based on allied health education or reciprocity. The **transition for test scheduling** will be done on a limited, pilot basis in the spring of 2003.

HOC is once again considering **recertification for nurse aides** and is looking in particular at how recertification might fulfill the federal requirement for employment verification. The employment verification process is time and resource intensive for both HOC and the industry. Requiring nurse aides to recertify, with one of several options for recertification based on employment verification, is being explored as a means of keeping nurse aides active on the nurse aide registry. Comments regarding this issue are welcome and may be directed to Marla Rhoden at HOC's mailing address, by telephone at 785-296-1281, or e-mail [mrhoden@kdhe.state.ks.us](mailto:mrhoden@kdhe.state.ks.us).

## Nurse Aide Reimbursement for Training

At a Health Occupations Credentialing (HOC) presentation at a recent KAHSA Nurse Leader's Conference, many questions were asked about facility reimbursement of nurse aide training costs. If you have questions about the process, please send your questions to Martha Ryan by phone (785-296-0058) or fax (785-296-3075) or email ([mryan@kdhe.state.ks.us](mailto:mryan@kdhe.state.ks.us)). Bill McDaniel, Department on Aging, has agreed to answer the questions. HOC will publish the questions and answers in the next Update.

## Status of the Proposed Medication Aide Program

The new, proposed curriculum is finished. The new tests are being field tested. A big thank you goes to the following schools that have agreed to participate in the field testing for the proposed medication aide tests: Butler County Community College, Flint Hills Technical College, Kansas City Area Technical School, Kaw Area Technical School, Neosho County Community College, Northeast Kansas Technical College and Wichita Area Technical School. HOC appreciates the assistance! Proposed regulations are currently under review by the Department of Administration. The regulations must also be reviewed by the attorney general's office, and when approved, will be published in the Kansas Register. A public hearing will be held 60 days after the proposed regulations are published in the Register. During the 60 days after publication of the regulations before the public hearing, the proposed curriculum will be available for review. Copies may be ordered for a small fee from the Kansas Curriculum Center at Washburn University. The instructor manual may be requested from HOC.

Many individuals participated in committees to develop the proposed curriculum, tests and program changes. HOC thanks them for their superb effort! They and the organizations that nominated them to serve are listed: Deb Bader, Kansas Health Care Association (KHCA); Caprice Becker, Manhattan Area Technical School; Joyce Bedsworth, Kansas Association of Homes and Services for the Aging (KAHSA); Kathy Bode, Flint Hills Technical College; Charlotte Campbell, KAW Area Technical School; Bea Carney, Johnson County Community College; Kathy Carter, Garden City Community College; Diana Finan, KHCA; Mary Gedrose, Kansas Advocates for Better Care (KABC); Denise German, KABC; Shawn Hase, ALFA-KAN; Carly Haynes, Pharmacy Board; Kathleen Lee, KHCA; Carolyn Middendorf, KABC and Kansas State Nurses Association; Robbie Pennington, KAHSA; Linda Pfeffer, Johnson County Technical Education Center; Kristine Pheifer, Wichita Area Technical School; Ben Rigdon, KAHSA; Linda Runge, Kansas Adult Care Executives; Anne Schmidt, Johnson County Community College; and Terri Stewart, Barton County Community College.

## Public Hearing on Proposed Regulation Revisions

A public hearing was held December 13, 2002 at 9:30 a.m. for the proposed revisions to the adult care home administrator regulations. The Board of Adult Care Home Administrators held their quarterly board meeting December 13, 2002. A roll call vote was taken regarding the proposed revisions to the regulations. The revisions were adopted unanimously and will become effective 15 days after publication in the Kansas Register. It is anticipated that the revised regulations will be published in the Kansas Register early in January 2003.

## Speech-Language Pathology and Audiology License Renewals

Renewal notices were mailed in August 2002 to the 817 licensees due for renewal by October 31, 2002. Of those due for renewal, 659 speech-language pathologists and 65 audiologists have renewed their licenses. A total of 29 speech-language pathologists and 3 audiologists returned notices indicating they were not renewing. After November 30, 2002, licenses not yet renewed are considered lapsed and would have to be reinstated.

Random continuing education reviews were conducted for 55 of the renewals received. All 55 of the licensees responded. The reviews were completed and all licenses renewed.

## Resources for Better Care

### *Heart Work*

At the Culture Change Joint Trainings for nursing facilities, the video *Heart Work* was discussed. Home health aides and nurse aides describe their life and work in drama and song. They celebrate who they are and the work they do with frail elders and the disabled. Their stories are powerful and can be an inspiration to staff. There is a discussion guide that accompanies the video. The video would be a good resource for a resident/family council program. Although the aides work in a nursing home setting, the message is appropriate for all settings that employ nurse aides.

The video was purchased by the Kansas Association of Homes and Services for the Aging. The department is grateful for the donation of this excellent educational resource. The video can be requested from the Kansas Public Health and Environment Information Library located at Kansas State. The catalog and order forms can be found at the following internet address: [kdhe.state.ks.us/library/listing.html#audiovisual](http://kdhe.state.ks.us/library/listing.html#audiovisual). The accession number the *Heart Work* video is DA6600. The only cost is return postage. The video is also available for purchase from the National Clearing House on the Direct Care Workforce. Their website is [www.directcareclearinghouse.org](http://www.directcareclearinghouse.org).

### *Latex Allergy*

Latex allergy is a growing concern, especially among health care workers. Estimates indicate 10-22 percent of health care workers are allergic to latex. Some researchers attribute the increase in the reported cases of latex allergy to more widespread use of latex gloves. The powdered corn starch that is used with some brands can also send latex particles airborne. Latex allergy may become more severe with each exposure. A Latex Allergy Health Education Facts sheet is available on the KDHE website. <http://www.kdhe.state.ks.us/pdf/hef/bg2253.pdf>

**The National Institute for Occupational Safety and Health (NIOSH) requests assistance in preventing allergic reactions to natural rubber latex among workers.** NIOSH recommends the use of *nonlatex* gloves for activities that are not likely to involve contact with infectious materials (food preparation, routine housekeeping, maintenance, etc.). So-called hypoallergenic latex gloves do not reduce the risk of latex allergy. However, they may reduce reactions to chemical additives in the latex (allergic contact dermatitis). Detailed information is available at <http://www.cdc.gov/niosh/latexalt.html>

In food preparation and service there are several alternatives to using gloves including utensils such as tongs, spoons, scoops, deli tissue and paper napkins. The use of gloves often creates situations where staff touch potentially contaminated food or surfaces and do not change gloves or use appropriate alternatives. Good hand washing is still the basis for infection control and food safety in food preparation and service.

### **Enforcement Data**

Due to technical problems, the enforcement data for the third quarter of 2002 was not available for publication. This information will be published in the next FACT SHEET II.

### **Regulation Interpretation**

A regulation interpretation on standing orders has been in place in Kansas since 1993. To clarify this policy, the Kansas regulation interpretation has been amended to reflect the new federal rule. A copy of the revised interpretation is included with this issue of the FACT SHEET II ([see next page](#)). The revised language appears in italics. Protecting residents by administering the pneumococcal and flu vaccine has been encouraged by the Department for a number of years.

**LONG TERM CARE  
REGULATION INTERPRETATION  
BUREAU OF HEALTH FACILITIES**

K.A.R. 28-39-155 (a)  
K.A.R. 28-39-436 (c)  
K.A.R. 28-39-247 (c)  
K.A.R. 28-39-282 (c)  
42 C.F.R. 483.40 (a)(b)  
42 C.F.R. 483.460

**SUBJECT:** Standing Orders

**DATE:** November 1, 1993

**REVISED:** March 14, 1997, Revised February 15, 2002

**NUMBER:** 93-18

**INTERPRETATION:** As used in this interpretation, a standing order is one formulated and signed by a physician, containing specific instructions for nursing actions for the conduct of resident care and which requires nursing judgement to implement. Standing orders are to be used in stipulated clinical situations when a physician is not readily available and the physician has determined that a licensed nurse may use clinical judgement without direct consultation prior to the nursing intervention.

**DISCUSSION:** Standing orders are acceptable for specified medications and treatments. The use of physical restraints may not be included on standing orders. The following shall be included in facility policy and procedures:

1. Standing orders are issued only by the resident's attending physician and are signed and dated by that physician.
2. Standing orders are reviewed at the same intervals as the physician plan of care.
3. A licensed nurse is responsible for implementing standing orders.
4. Choices of similar treatments or medications shall be kept to a minimum.
5. Standing orders are to be written in accordance with accepted professional standards and are specific, understandable and complete.
6. Medications included in standing orders may include over the counter drugs and a limited number of prescription drugs. Schedule II drugs and psychopharmacologic drugs are not appropriate selections for standing orders. *It is appropriate to include influenza and pneumococcal vaccines in standing orders as long as a licensed nurse has performed an assessment to identify possible contraindications for each resident.*
7. A limitation of the number of times a medication can be used in close succession without notifying the physician must be stated.
8. A copy of the signed and dated standing orders shall be placed in the resident's clinical record.

Standing orders are an accepted interdependent intervention providing for continuous physician direction in the physicians absence. They are commonly used in settings in which the physician is not readily available and , thus provide the licensed nurse certain legal protection to intervene appropriately in the resident's best interest.